

## *Book Reviews*

### **International Law and Infectious Diseases.**

David P. Fidler. Oxford University Press, 1999.

This thoughtful book should find its readership among health professionals, lawyers, international relations scholars, and activists addressing issues of infectious diseases in the context of public health, international trade, environment protection, or war. Its chapters include the following topics: a historical overview, International Health Regulations, international legal framework, trade law, human rights law, war and weapons, environmental law, international relations, and a Draft Framework Convention on Global Infectious Disease Prevention and Control.

Early attempts at controlling the epidemic spread of diseases by quarantining international shipping vessels were costly and ineffective. Beginning in the mid-19th century, a series of international sanitary conferences sought legal agreements among states to reconcile the competing demands of commerce and public health. As microbes and their vectors do not respect international boundaries, David Fidler has chosen a rich subject for this study of international legal regulation.

In democracies at least, rational trade policies may be swayed by popular concerns; for example, bans on certain foodstuffs may be more driven by the public's fear of disease than by good science. The International Health Regulations, which are supposed to address these issues, are outdated, limited in scope, and not respected. Fidler therefore proposes a broader international convention on global infectious disease prevention and control, which would incorporate revised international health regulations; he provides a draft convention for consideration.

As AIDS now kills more people globally than any other infectious disease, Fidler's discussion of the right to health and the confluence of human rights and public health in the context of the AIDS pandemic is of particular interest. Yet his draft convention of nation-states does not address either the incapacity of the states that are worst affected or the importance of active participation by nongovernmental organizations and transnational corporations. Present-day international law seems incapable of addressing the broader issue of collective international responsibility to act in the face of the global AIDS pandemic.

The book is well paced and scholarly. Fidler's analysis is cautious, but he does not shrink from discussing the failure of the World Health Organization to apply the successes of international legal regulation in fields such as international trade, aviation, labor standards, and the environment to infectious diseases and public health. One of the many ironies delineated in the book is the resurgence of interest in international legal solutions to public health challenges when science and medicine fail to provide enduring national solutions.

Interest in international public health law waned in the 20th century, when vaccination and improvements in public services and hygiene reduced or eliminated the threats of smallpox, plague, cholera, and yellow fever. Yet today, the increasing speed and scale of global trade and population movements pose new risks from emerging and reemerging diseases. Fidler's proposed international convention on global infectious disease prevention and control would represent progress toward addressing these concerns and deserves serious consideration.

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**Oxford Handbook of Tropical Medicine.**  
Michael Eddleston and Stephen Pierini. Oxford  
University Press, New York, 1999.

In judging a new textbook, one is initially influenced by the authors' reputation and qualifications. The authors of this Oxford Handbook, Michael Eddleston and Stephen Pierini, are listed on the front cover, but their names do not appear again. In the introduction, these mystery authors tell us that the Oxford Handbook of Tropical Medicine was written to answer a need for a soft-cover, pocket-sized (18 x 10 x 2.5 cm), inexpensive, lightweight (300 grams) handbook of clinical medicine in the tropics for "junior doctors" who work in the developing world, where few laboratory tests are available and technical and human resources may be lacking. This book was written in collaboration with World Health Organization (WHO) staff, as evidenced in the acknowledgments, in which no fewer than 22 WHO consultants appear, as well as the foreword by David Heymann, Executive Director, Communicable Diseases, WHO.

So what's in this handbook, and how is it organized? The first 16 pages make up the introduction, which briefly covers such topics as WHO's Essential Drugs Programme, outbreak investigations, universal and isolation precautions, and integrated management of childhood diseases. The next section (160 pages) covers five major infectious disease areas (malaria, HIV and sexually transmitted diseases, tuberculosis, diarrheal diseases, and acute respiratory infections). Except for the section on fevers and systemic signs, the rest of the book is systems based, covering most internal medicine topics, including cardiology, chest medicine, renal diseases, gastroenterology, neurology, dermatology, endocrinology, hematology, nutrition, injuries and poisoning, and immunization. Each section spans 30-50 pages of very small print, for which those of us over 40 will need the assistance of a magnifying glass.

Before we tell you what we thought of the book, let us point out two refreshing features. The authors ask that readers provide comments and criticisms for improving future editions. (This is a clue as to the identity of the authors.) The second is the authors' expectation that readers would and should adapt the book for local conditions. To this end, they have included blank pages

throughout the book for the reader to add and modify treatments and diagnostic tests as necessary.

This book focuses on diseases, both infectious and non-infectious that are seen in tropical developing countries and on therapies that are available there. You will not find imipenem, moxifloxacin, insulin pumps, or even culture and sensitivity data. Drugs recommended may not always be ideal, but they are likely to be available locally. Another major feature of the infectious disease section is the liberal use of excellent WHO algorithms, which are particularly useful for the inexperienced physician.

Disease descriptions are concisely written and organized with a section on etiology/life cycle, clinical features, diagnosis, management, and control. Most diseases are summarized in one page or less, except for major diseases such as malaria, tuberculosis, and HIV. A good part of the book is problem-based, by symptoms, and this is by far its major strength. This problem-oriented approach is ideal for the rural developing world, where "medicine by intuition" is often practiced, and clinical skills, knowledge, and judgment are all that may be available for disease management.

The major infectious disease sections and the one on nutrition are excellent. The systems sections are very good but somewhat lacking in perspective. Differential diagnoses are always listed, but the inexperienced physician may have some difficulty sorting out the top five conditions to be considered. Clearly, these vary in different parts of the world (hence the blank pages), but there are common problems everywhere that tend to head most lists. We particularly loved the section on how to do a burr hole, complete with diagrams (a worthwhile technique to practice on your teenage children).

We were a bit disappointed that Bacille Calmette-Guérin vaccine was covered in only seven lines, that bed nets were not mentioned for malaria control, that typhoid was not included in the differential diagnosis of lymphocytosis or prolonged fever, that short-course therapy was not recommended for typhoid fever, and that tinidazole or single-dose metronidazole were not suggested for invasive amebiasis. In addition, the book is somewhat inconsistent about which diagnostic tests are recommended: on the one hand, bacterial cultures are almost never available in rural areas of the tropics, but little

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emphasis is given to presumptive treatment. On the other hand, in the nephrology section, the authors surprisingly recommend an autoantibody screen and complements, urine pH, and calcium levels.

Enough of nitpicking. The bottom line? This is an excellent first edition of a handbook of tropical and internal medicine for the rural practitioner. It is a comprehensive, concise, well written, and (for the most part) practical handbook that provides a wealth of information on diagnosis, treatment, and decision making. We recommend it highly for medical students, residents, and even infectious and tropical disease consultants planning to work in the tropics or to care for patients from the tropics.

Given their level of training, the authors have done a remarkable job. We have decided, on the basis of the following clues, that the authors of this handbook are probably medical residents, or “registrars” in the British system. First, the book

is dedicated to their parents rather than their spouses, so they are probably young and unmarried. They acknowledge their “long-suffering mentors, David Warrell and David Theakston,” who send “fresh-faced medical students out to remote corners of the world ...” This book was almost certainly written by “kids,” recent medical students who had an international health experience during training. In this world of academic medicine, it is a shame that credibility is accorded only those who have more initials *after* their names than *in* their names. We should judge an excellent book such as this one by its contents and not by the prestige of its authors. As Butch Cassidy said to the Sundance Kid, “Who are those guys?” In this case, it doesn’t matter.

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